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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i> Mail Stop: Office of Initial Patent Examination Express Mail Receipt No. VIA FACSIMILE Total Number of Pages in This Submission 5	Application / Conf. No.	10/792,153 / 4867
	Filing Date	March 02, 2004
	First Named Inventor	Robert E. Eccles
	Examiner Name	Unknown
	Art Unit	2825
	Patent No.	703-746-9195
	Attorney Docket Number	X-1270 US

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> Preliminary Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavit(s)/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Change Status to LARGE ENTITY <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Substitute PTO-1449(s) IDS by Applicant (PTO/SB/08A) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (with Recordation Cover Sheet) <input type="checkbox"/> Declaration / Oath <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition - <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Corrected Filing Receipt; copy of filing receipt; copy of Application Data Sheet
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Customer Number	24309		Reg. Number 37,652
Attn:	Kim Kanzaki		(Customer Number)
Signature			
Date	June 25, 2004	Charge any additional fees required/credit any overpayment to our Deposit Account Number: 24-0040	

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being sent Via Facsimile to the U. S. Patent Office, attention to Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on this date: June 25, 2004			
Typed or Printed Name	Pat Slaback		
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PATENT

IN THE UNITED STATES PATENT OFFICE

Applicant: Robert E. Eccles
Assignee: Xilinx, Inc.
Title: "Method and Apparatus for Design Verification with
Equivalency Checking"
Serial No.: 10/792,153 File Date: 03-02-04
Examiner: Unknown Art Unit: 2825
Docket No.: X-1270 US

VIA FACSIMILE 703-746-9195
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REQUEST FOR CORRECTED FILING RECEIPT


Dear Sir:

Applicant requests a corrected Filing Receipt in the above identified patent application, to include the following priority information:

This application claims priority to provisional application no. 60/452,143 which was filed on March 4, 2003. A copy of the Application Data Sheet filed with the above-referenced application which includes the claimed priority is enclosed.

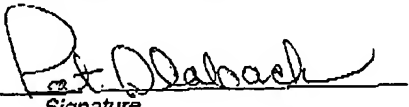
No fee is due with this communication but the Commissioner is hereby authorized to charge any additional fees, or credit any overpayment which may be required to Deposit Account No. 24-0040.

Respectfully submitted,


Kim Kanzaki
Attorney for Applicant
Reg No. 37,652

I hereby certify that this correspondence is being sent via Facsimile to 703-746-9195
on June 25, 2004.

Pat Slaback
Name


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APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/792,153	03/02/2004	2825	1312	X-1270 US	5	31	7

CONFIRMATION NO. 4867

 24309
 XILINX, INC
 ATTN: LEGAL DEPARTMENT
 2100 LOGIC DR
 SAN JOSE, CA 95124

FILING RECEIPT



OC000000012921312

Date Mailed: 06/10/2004

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Robert E. Eccles, San Jose, CA;

Assignment For Published Patent Application

Xilinx, Inc., San Jose, CA;

Domestic Priority data as claimed by applicant

Foreign Applications

If Required, Foreign Filing License Granted: 06/10/2004

Projected Publication Date: Request for Non-Publication Acknowledged

Non-Publication Request: Yes

Early Publication Request: No

Priority to:

Title

Method and apparatus for design verification with equivalency check

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 XILINX, INC.